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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
*HVT* *None*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*HVT* *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 05/24/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NC	SHEETS DRAWING 6	TOTAL CLAIMS 82	INDEPENDENT CLAIMS 9
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>allowance</i>				
Verified and Acknowledged <i>Haubhan</i> Examiner's Signature	Initials			

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## TITLE

Modular furniture

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